# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT



#### RECEIVED FAIR PSTATEMENT OF ECONOMIC INTERESTS CTICES COMMISSION

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### RECEIVED

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Please type or print in ink.		MAR 3 1 ZUII
NAME OF FILER (LAST)  VAPELA	(FIRST) EDWARD	CITY OF MAYWOO
1. Office, Agency, or Court	المنظمة المنظمة - المنظمة المنظ	
Agency Name CTTY OF MAYWODD	. Mayor	
Division, Board, Department, District, if applicable	Your Position	
► If filling for multiple positions, list below or on an attachment	·	······································
Agency:	Position:	<del></del>
2. Jurisdiction of Office (Check at least one box)	مديدي والقديد و والمديدة و القاف من القديدة و القاف و والفيديدي لا <u>مسيدي القديد و القاف و و القاف و المتعلق و</u> والقديدة والمديدة والمديدة و القاف و والقاف و والفيدية و القيام و القيام و القاف و القاف و القاف و القاف و الق	ها المنظمة الم المنظمة المنظمة
☐ State	☐ Judge (Statewide Jurisdictio	n)
Multi-County	County of Los And	genes
City of	Other	<del></del>
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2010, through 2010.	December 31,	
The period covered is, through 2010.	December 31, O The period covered is J leaving office.	lanuary 1, 2010, through the date of
Assuming Office: Date	O The period covered is _ of leaving office.	, through the date
Candidate: Election Year Office	sought, if different than Part 1:	
. Schedule Summary		
Check applicable schedules or "None."	► Total number of pages including th	is cover page:
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & I	Business Positions – schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - se	
Schedule B - Real Property - schedule attached	☐ Schedule E - Income - Gifts - Ti	ravel Payments - schedule attached
	or- portable interests on any schedule	•
Notic - No teb	Unlable interests on any schedule	Manufallia de la companya de la comp
		_
herein and in any attached schedules is true and complete.	acknowledge ti	
I certify under penalty of perjury under the laws of the State	e of Californi	
Date Signed 3/3/2011 (month. day, year)	Sig	
(none say you)	_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

### SCHEDULE A-2

### Investments, Income, and Assets

of Business Emilies/Thucketices (Ownership Interest is 10% or Greater) CALIFORNIA FORM 700

PARAMEND MENT

▶ 1. BUSINESS ENTITY OF TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE
Flavor! Vienela	BUSINESS ENTITY OR TRUST
	Greek one box.
GOGO E SINSON (NC.	DINMESTIMENTI DI REAL PROPERTAY
Address (Business Address Acceptable)	
Ghedh কৰে ্রা Trust, go to 2 সা Business Satity, complete the box, then go to 2	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
GENERAL DESCRIPTION OF BUSINESS ACTIMITY ALCOHOLO, PANCORONICE	
FAIR MARKET VALUE IF AFRUGABUE, LUST DATE:	Description of Business Activity or Gity or Other Precise Location of Real Property
S101901 = S1009000	
NATURE OF INVESTMENT  Solo Reprocedip Politicatip   Out	Ovar (31/100/100)
YOUR BUSINESS FOSITION	NATURE OF INTEREST
D 2. IDENTIFY THE GROSS INCOME PECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TEUST)	Leasedroki
□ \$9 = \$499	ि दिख्ये। box if additional subsolutes reporting investments or real property are attached
> 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attack a paparete object if december)	
Spine Care vollo Phase Solution weithing	
Comments:	
Verification	
Point Name Elward Verde	
Office Agency of Cours Chirace Manager	
	suming   Leaving   Candidate
I have used all reasonable diligence in preparing this statement. I have re contained herein and in any attached schedules is two and complete.	viewed this statement and to the best of my knowledge the information.  (d)(5)
leadly under panelty of perjusy and , the laws of the State of G	
Deate Stylined	Dignature =

## SCHEDULE A-2 Investments, Income, and Assets

### of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

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		ITICAL	PRAC	rices:	COMMIS	SION	
N	ame						
Į							
۱ —							_

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Edward Varela	Edward Varola
Name 424 F. 5874 ST	Name 4634 F.5874 ST
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one  Trust, go to 2  Business Entity, complete the box, then go to 2	Check one  Check one  Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  ACQUIRED  DISPOSED  Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership Other	NATURE OF INVESTMENT Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
➤ 2: IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)  □ \$0 - \$499 □ \$500 - \$1,000 □ \$1,001 - \$100,000 □ \$1,001 - \$10,000	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)  □ \$0 - \$499 □ \$500 - \$1,000 □ \$500 - \$1,000 □ \$1,001 - \$10,000
SPINE CAPE PORTABLE SINGLE SOURCE OF SPINE CAPE PORTABLE SHOULD OF MORE INTERPORTABLE SHOULD PHUS SPINE CAPE PORTAGE PHUS, Solvition Mucinc, Industrial Pharmay MOST.	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Amoch a separate sheet if nicessary).
► 4 INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	<ul> <li>4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST</li> </ul>
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	INVESTMENT REAL PROPERTY  1824 F. 55TH ST Maynord a 90270
Name of Business Entity <u>or</u> Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  ACQUIRED DISPOSED  Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:\_\_\_\_

### SCHEDULE B Interests in Real Property (Including Rental Income)

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		<del></del>			

STREET ADDRESS OR PRECISE LOCATION 4634 F. 6674 ST	➤ STREET ADDRESS OR PRECISE LOCATION
Maywood, CA 90270	CITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000
NATURE OF INTEREST.  Ownership/Deed of Trust  Easement	NATURE OF INTEREST  Ownership/Deed of Trust  Easement
Leasehold	Leasehold
IF RENTAL PROPERTY, GROSS INCOME RECEIVED.	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$199  \$500 - \$1,000  \$1,001 - \$10,000  \$10,001 - \$100,000  \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 \$0VER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of the sour
income of \$10,000 or more.	income of \$10,000 or more.
You are not required to report loans from commercia	Il lending institutions made in the lender's regular course ublic without regard to your official status. Personal loar of business must be disclosed as follows:
You are not required to report loans from commercia of business on terms available to members of the pu	I lending institutions made in the lender's regular course ublic without regard to your official status. Personal loar
You are not required to report loans from commercial of business on terms available to members of the pure and loans received not in a lender's regular course of the pure to	Il lending institutions made in the lender's regular course ublic without regard to your official status. Personal loar of business must be disclosed as follows:
You are not required to report loans from commercial of business on terms available to members of the purand loans received not in a lender's regular course of NAME OF LENDER*	Il lending institutions made in the lender's regular course ublic without regard to your official status. Personal loar of business must be disclosed as follows:
You are not required to report loans from commercia of business on terms available to members of the purand loans received not in a lender's regular course of NAME OF LENDER*  ADDRESS (Business Address Acceptable)	Il lending institutions made in the lender's regular course ublic without regard to your official status. Personal loar of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
You are not required to report loans from commercia of business on terms available to members of the purand loans received not in a lender's regular course of NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	Il lending institutions made in the lender's regular course ablic without regard to your official status. Personal load of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
You are not required to report loans from commercial of business on terms available to members of the puland loans received not in a lender's regular course of the December of Lender*  Address (Business Address Acceptable)  Business Activity, IF Any, OF LENDER  INTEREST RATE  TERM (Months/Years)	Il lending institutions made in the lender's regular course ablic without regard to your official status. Personal load of business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)

### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

► 1. INCOME RECEIVED	► 1. INCOME/RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Spine Care & Ortho Phys	SOLUTIONS MMC, INC
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
8610 S. SEOLVEDA BIVE, LIM, KA, LA	6200 Wilstree Blve, 4910, LA, ca 90048
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
MEDICA, DOCTOR	(other love, Medical
YOUR BUSINESS POSITION	HEARING REPHENSITATIVE
HEARING REPLESENTATIVE	HEARING REPRESENTATIVE
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000 \$\begin{array}{cccccccccccccccccccccccccccccccccccc	\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000 OVER \$100,000
X \$10,001 - \$100,000	M \$10,001 - \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of	Sale of(Property, car, boal, etc.)
(Property, car, boat, etc.)	
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other	Other
Other (Describe)	(Describe)
➤ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	OD_
	lending institutions, or any indebtedness created as part
of a retail installment or credit card transaction, made available to members of the public without regard to y	
not in a lender's regular course of business must be o	
	•
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	% None
nounces (business nouless nucepiable)	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	☐ None ☐ Personal residence
Sources from the first of periodic	•_
	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD	•
<u> </u>	City
\$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other(Describe)
•	(בפטוטפט
Comments:	

### SCHEDULE D Income - Gifts

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	

NAME OF SOURCE BEST BEST & KRIEGER LLP	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)  5 PARK PARA	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
9, 16, 10 , 123.34 FOOD/ BEVERES	\$
\$	\$
	\$
NAME OF SOURCE	➤ NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
/\$	\$
	\$
NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
\$	\$
	\$
Comments:	,